

Date/Time of Application:_	
Dues Paid \$	

Space Family Education, Inc. Membership Application

Accredited by
National Academy
of Early Childhood
Programs

Name:			
Address:			
City:	State:	Zip	o:
Home Phone:()	Work Phot	ne: (<u>)</u>	
Email:			
On-site Building/Room:	Mail Code:		
Check One: () NASA Civil Service/Military () On-site Contractor of NASA space in an on-site building v () Off-site Contractor of NASA	FJSC (an on-site contractor is with an associated phone whe		_
Contractor Personnel of NASA-JSC Company:NASA Technical Monitor:	· • • • • • • • • • • • • • • • • • • •		
Do you wish to place children on the	e waiting list? () Yes	() No	
Name(s) of Child(ren):		Date(s) of Birth:	
		(Actual or	
		Estimated)	
Provide earliest date your child(ren)	will be available for enrollm	ent:	
Name(s) of child(ren) already on the	e waiting list (if applicable):_		
Name(s) of child(ren) enrolled in the	e center (if applicable):		
From time to time, work groups are playground work days. Please indic () Fundraising () Budget	ate if you are interested in pa	rticipating in any of t	the following areas:
Membership dues are \$20 per year b September-November: \$20 Decem			vs: ugust: \$5
Please mail or drop off this form wit Mailing Address: 2101 NASA F Building/Mail Code: B211/AHD	th your check made payable to Rd. 1, B211/AHD, Houston,		
TO BE COMPLETED BY SFEI ON Membership No: Verification of Contractor Status:	NLY: New Member Package:_	Da	atabase: